



RCE 3676
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Docket: 14036

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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| First Named Inventor: | Michael R. Oldenburg | |
| Application No.: | 09/855,001 | |
| Filing Date: | May 14, 2001 | |
| Title: | RETROFITTALBE SEVERE DUTY SEAL FOR A SHAFT | |

TRANSMITTAL LETTER

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

I hereby certify that this document is being sent via First Class U.S. mail addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 8 day of September, 2003.

KrisAnne Popovits
KrisAnne Popovits

Dear Sir:

The following documents are enclosed in connection with the above-referenced patent application:

1. Request for Continued Examination (RCE) Under 37 CFR 1.114 (2 pages);
2. Amendment (15 pages);
3. Supplemental Information Disclosure Statement Under 37 CFR 1.97(b)(4) (2 pages);
4. Form PTO/SB/08A (14 pages, submitted in duplicate);
5. Copies of 199 References Cited;
6. Petition For Extension Of Period For Response (1-page);
7. Fee Determination (After Amendment of Claims) (1 page);
8. Check No. 965789 in the amount of \$589.00 (\$205 to cover two-month extension of time fee; \$375 to cover of RCE fee; and \$9 to cover extra claim fee); and
9. Return Receipt Postcard.

Application No.: 09/855,001

Docket No.: 14036

Respectfully submitted,

**DORSEY & WHITNEY LLP
Customer Number 25763**

Date: 9- 8-03

By: S. Wade Johnson

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FEE DETERMINATION (After Amendment of Claims)

| Complete if Known | |
|---|----------------------|
| Application No. | 09/855,001 |
| Filing Date | May 14, 2001 |
| First Named Inventor | Michael R. Oldenburg |
| Group Art Unit | 3676 |
| Examiner Name | V. Patel |
| Atty. Docket Number | 14036 |
| Claims as Amended in Response to Office Action dated: | N/A |

| METHOD OF PAYMENT (Check One) | | | | AMENDMENT FEE CALCULATION (Continued) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|------------------------------------|---|-----------------------|---|--|--|--|----------------------------------|------------------------------------|-----------------|-----------------|-------|----|--|-----------------------|--------|-----|---|-------------------|--|-----|--|---|-------|-----|---|---------------------|------------------|------------------|--|----|-------|------------------------|---------------------------|----|-----------------------------------|-----|------------------|--------------------------|-----|-----|---|----|-----|---|--|--|-----|----|-------------------------|--|-----|----|----------------------------------|--|-------|-----|------------------------------------|--|-----|-----|-------------------------------|--|-----|-----|-------------------|--|-----|-----|---|----------|
| 1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account No.: 04-1420 Deposit Account Name: DORSEY & WHITNEY LLP <input checked="" type="checkbox"/> Charge any additional fee required under 37 C.F.R. 1.16 and 1.17 <input checked="" type="checkbox"/> Applicant claims small entity status (see 37 C.F.R. 1.27) 2. <input checked="" type="checkbox"/> Check Enclosed | | | | 3. ADDITIONAL FEES <table border="1"> <thead> <tr> <th>Large Entity Fee</th> <th>Small Entity Fee</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>110</td> <td>55</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>410</td> <td>205</td> <td>Extension for reply within second month</td> <td>\$205.00</td> </tr> <tr> <td>930</td> <td>465</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>1,450</td> <td>725</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>1,970</td> <td>985</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>1,300</td> <td>650</td> <td>Issue Fee-Utility/Reissue</td> <td></td> </tr> <tr> <td>320</td> <td>160</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>320</td> <td>160</td> <td>Filing brief in support of appeal</td> <td></td> </tr> <tr> <td>280</td> <td>140</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>110</td> <td>55</td> <td>Terminal Disclaimer Fee</td> <td></td> </tr> <tr> <td>110</td> <td>55</td> <td>Petition to revive – unavoidable</td> <td></td> </tr> <tr> <td>1,300</td> <td>650</td> <td>Petition to revive – unintentional</td> <td></td> </tr> <tr> <td>130</td> <td>130</td> <td>Petitions to the Commissioner</td> <td></td> </tr> <tr> <td>180</td> <td>180</td> <td>Submission of IDS</td> <td></td> </tr> <tr> <td>750</td> <td>375</td> <td>Request for Continued Examination (RCE)</td> <td>\$375.00</td> </tr> </tbody> </table> | | | | Large Entity Fee | Small Entity Fee | Fee Description | Fee Paid | 110 | 55 | Extension for reply within first month | | 410 | 205 | Extension for reply within second month | \$205.00 | 930 | 465 | Extension for reply within third month | | 1,450 | 725 | Extension for reply within fourth month | | 1,970 | 985 | Extension for reply within fifth month | | 1,300 | 650 | Issue Fee-Utility/Reissue | | 320 | 160 | Notice of Appeal | | 320 | 160 | Filing brief in support of appeal | | 280 | 140 | Request for oral hearing | | 110 | 55 | Terminal Disclaimer Fee | | 110 | 55 | Petition to revive – unavoidable | | 1,300 | 650 | Petition to revive – unintentional | | 130 | 130 | Petitions to the Commissioner | | 180 | 180 | Submission of IDS | | 750 | 375 | Request for Continued Examination (RCE) | \$375.00 |
| Large Entity Fee | Small Entity Fee | Fee Description | Fee Paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 110 | 55 | Extension for reply within first month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 410 | 205 | Extension for reply within second month | \$205.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 930 | 465 | Extension for reply within third month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1,450 | 725 | Extension for reply within fourth month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1,300 | 650 | Issue Fee-Utility/Reissue | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 320 | 160 | Notice of Appeal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 320 | 160 | Filing brief in support of appeal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 280 | 140 | Request for oral hearing | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 110 | 55 | Terminal Disclaimer Fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1,300 | 650 | Petition to revive – unintentional | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 130 | 130 | Petitions to the Commissioner | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 180 | 180 | Submission of IDS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 750 | 375 | Request for Continued Examination (RCE) | \$375.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| AMENDMENT FEE CALCULATION <table border="1"> <thead> <tr> <th colspan="4">1. EXTRA* CLAIM FEES</th> </tr> <tr> <th>Claims Remaining after Amendment</th> <th>Highest Number Previously Paid for</th> <th>Present Extra</th> <th>Fee from Below*</th> </tr> </thead> <tbody> <tr> <td>Total</td> <td>64</td> <td>43</td> <td>= 1 x \$9.00 = \$9.00</td> </tr> <tr> <td>Indep.</td> <td>7</td> <td>4</td> <td>= 0 x \$42.00 = 0</td> </tr> <tr> <td>First Presentation of Multiple Dependent Claim</td> <td></td> <td>x</td> <td>=</td> </tr> <tr> <td></td> <td></td> <td></td> <td>Subtotal (1) \$9.00</td> </tr> </tbody> </table> <p>*Calculation of Extra Claim Fees</p> <table border="1"> <thead> <tr> <th>Large Entity Fee</th> <th>Small Entity Fee</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr> <td>18</td> <td>9</td> <td>Claims in excess of 20</td> </tr> <tr> <td>84</td> <td>42</td> <td>Independent claims in excess of 3</td> </tr> <tr> <td>280</td> <td>140</td> <td>Multiple dependent Claim</td> </tr> <tr> <td>84</td> <td>42</td> <td>Reissue independent claims over original patent</td> </tr> <tr> <td>18</td> <td>9</td> <td>Reissue claims in excess of 20 and over original patent</td> </tr> </tbody> </table> | | | | 1. EXTRA* CLAIM FEES | | | | Claims Remaining after Amendment | Highest Number Previously Paid for | Present Extra | Fee from Below* | Total | 64 | 43 | = 1 x \$9.00 = \$9.00 | Indep. | 7 | 4 | = 0 x \$42.00 = 0 | First Presentation of Multiple Dependent Claim | | x | = | | | | Subtotal (1) \$9.00 | Large Entity Fee | Small Entity Fee | Fee Description | 18 | 9 | Claims in excess of 20 | 84 | 42 | Independent claims in excess of 3 | 280 | 140 | Multiple dependent Claim | 84 | 42 | Reissue independent claims over original patent | 18 | 9 | Reissue claims in excess of 20 and over original patent | Other fee (specify): Subtotal (2) \$580.00 Total Amount of Payment: \$589.00 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. EXTRA* CLAIM FEES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Claims Remaining after Amendment | Highest Number Previously Paid for | Present Extra | Fee from Below* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total | 64 | 43 | = 1 x \$9.00 = \$9.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Indep. | 7 | 4 | = 0 x \$42.00 = 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| First Presentation of Multiple Dependent Claim | | x | = | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | Subtotal (1) \$9.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Large Entity Fee | Small Entity Fee | Fee Description | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18 | 9 | Claims in excess of 20 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 84 | 42 | Independent claims in excess of 3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 280 | 140 | Multiple dependent Claim | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 84 | 42 | Reissue independent claims over original patent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18 | 9 | Reissue claims in excess of 20 and over original patent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Submitted by:

| CUSTOMER NUMBER | | DORSEY & WHITNEY LLP Intellectual Property Department 50 South Sixth Street, Suite 1500 Minneapolis, MN 55402-1498 | | |
|---------------------------|------------------|---|---------------------------|--------------|
| Name: S. Wade Johnson | Reg. No.: 50,873 | Telephone: (612) 340-8835 | Facsimile: (612) 340-8856 | |
| Signature: <i>S. Wade</i> | | | | Date: 9-8-03 |